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Date: Thu, 18 Jan 96 15:46:18 EST
Subject: Naval Service Medical News (NSMN) 96-02

1. This service is for general distribution of information and news of interest to Navy and Marine Corps members, civilian employees, family members and retired beneficiaries of Navy Medicine. Maximum and timely redistribution or further reproduction and use is encouraged. This message has been coordinated with the Commandant of the Marine Corps (CMC). The Commandant has authorized transmission to Marine Corps activities.

2. HEADLINES AND GENERAL INTEREST STORIES THIS WEEK:
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HEADLINE: Navy and Marine Corps Collaborate on Patient Care
NAVHOSP Camp Lejeune, NC (NSMN) -- The Navy Sports Medicine Clinic and Rehabilitation Center at the School of Infantry, Camp Lejeune, officially opened Friday, 5 January 1996. MajGen P.G. Howard, USMC, Commander, Marine Corps Base, Camp Lejeune, cut a ribbon stretched between two resistance exercise machines. He was assisted by CAPT M.L. Cowan, MC, Commanding Officer, Naval Hospital Camp Lejeune, and Col J.P. O'Donnell, USMC, Commanding Officer, School of Infantry.

Through the efforts of O'Donnell and his staff, a vacant building in a state of disrepair at the School of Infantry (SOI) was transformed into a state-of-the-art rehabilitation center. In four short months, this center has become a functional unit replete with an array of aerobic and resistance exercise equipment. In addition to the exercise area, the Sports Medicine Clinic has two exam rooms where the clinical staff evaluate injured Marines. There is also an administrative area, which serves as the nerve center for the entire program.

LTJG Christine Federici, NC, USNR, the Nurse Manager of the facility, stated that this rehabilitative service will provide a unique opportunity to treat musculoskeletal injuries sustained by Marines at SOI and expeditiously return them to training. Word of this innovative program has reached the West Coast SOI at Camp

Pendleton, CA, which has expressed a keen interest in establishing a program modeled after Camp Lejeune's pioneering effort.

For more information on this innovative Sports Medicine Clinic, a triumph of Navy and Marine Corps collaboration and display of teamwork, contact CDR E.J. Henrie, MC, at (910) 451-2194.

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HEADLINE: Navy Medicine Supports Joint Task Force Exercise 96-1
COMMANDER, SECOND FLEET (NSMN) -- Navy medicine contributed to Joint Task Force Exercise 96-1, directed by Commander in Chief, U.S. Atlantic Command, Gen John J. Sheehan, USMC, and executed by Commander, Second Fleet, VADM Jay L. Johnson. The two-week exercise took place from military installations ashore and afloat, along the East Coast from Virginia to Georgia. Johnson, serving as Commander, Joint Task Force 950, controlled the exercise from aboard the Norfolk-based command and control ship USS MOUNT WHITNEY (LCC 20).

From 29 November until 16 December, more than 16,000 personnel from all branches of the armed services participated in JTFEX 96-1. Forces trained in a simulated, high-threat environment that involved air, naval and ground operations as well as surveillance, rescue and other operations.

Task Force medical leadership was provided by CDR Ken Schor, MC, Officer in Charge of Fleet Surgical Team SIX and CATF Surgeon, and CDR Dean Bailey, MC, Senior Medical Officer of GEORGE WASHINGTON and Carrier Battlegroup Surgeon. More than 36 Medical Department officers and 131 Medical Department enlisted personnel supported task force units, including USS TORTUGA (LSD 46), USS PORTLAND (LSD 37), USS TRENTON (LPD 14), USS MOUNT BAKER (AE 34) and the 22nd Marine Expeditionary Unit (Special Operations Capable).

Medical play emphasized medical communications, preventive medicine, medical intelligence and patient regulation in preparations for forward deployment.

Commander GEORGE WASHINGTON Battle Group hosted Dr. Stephen Joseph, Assistant Secretary Of Defense for Health Affairs, as well as Lt Gen Edgar R. Anderson, USAF, MC, and VADM Harold Koenig, MC, the Surgeons General for the Air Force and Navy, respectively. Briefings were provided on carrier operations and afloat telemedicine using transfer of medical data through the electronic media, teleconferencing and teleradiology. This capability will allow enhanced consultation to afloat units. Story by CAPT Bruce K. Bohnker, MC, Second Fleet Surgeon

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HEADLINE: Hospitalman Saves Brother By Donating Bone Marrow

NAVHOSP Twentynine Palms, CA -- Have you ever had a seriously ill loved one whom you wished you could just magically reach out and touch to make them well again? One Hospital Corpsman here at Naval Hospital Twentynine Palms was able to successfully experience that situation recently with his brother -- through the magic of a bone marrow transplant.

HN Lance Bryan, an emergency medical technician and resident of Hall Summit, LA, was called upon by Saint Jude's Childrens Research Hospital in Memphis, TN, to provide a blood sample to see if he was a possible match as a bone marrow donor for his 17-year-old brother, also a resident of Hall Summit. Bryan's brother, Kyle, was diagnosed with acute lymphocytic leukemia in July of last year. Tests indicated that 20-year-old Lance was a preliminary match for his brother.

Naval Hospital Twentynine Palms arranged no-cost orders for the hospitalman to travel back to Memphis for further testing. As it turned out, he matched perfectly, with six of six antigens, and the transplant was done. "It was a really great feeling, being able to help my brother survive a life-threatening illness. Words just can't describe it," said Bryan.

Bryan is no stranger to the Bone Marrow Transplant program. As a volunteer in drawing the blood of potential donors, he has worked with Naval Hospital Twentynine Palms National Marrow Donor Program (NMDP) coordinator, LT Julie Woodside, NC, of the Emergency Medicine Department, almost since he has arrived for duty at the hospital. "I learned, by helping my brother, that there really is a purpose for people being in the Bone Marrow Donor Program," said Bryan. "This program really does save lives."

Klye is doing well right now, thanks to the successful marrow transplant. The Navy recently arranged for Lance to be transferred to Naval Hospital Memphis, located at Millington, TN, through a humanitarian transfer so he could be closer to his brother, if needed. Bryan will be sorely missed at Twentynine Palms, but to borrow from a cliché, Twentynine Palms' loss is Memphis' gain.

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HEADLINE: Dental Plan Reduces Time Requirements for Enrollment
OCHAMPUS Aurora, CO (NSMN) -- The TRICARE Active-Duty Family Member Dental Plan has become more flexible for service members returning from overseas assignments.

Returning service members with 12 months remaining on active duty tours may now enroll their families in the dental plan. Previously, the returning service members needed a 24-month active duty commitment remaining before they could enroll family members.

CHAMPUS officials said sponsors wishing to enroll family members in the dental plan must meet the following conditions:

- Sponsors must be returning from an overseas area where the dental plan is unavailable.
- Enrolling family members must have lived with sponsors at the overseas location.
- Sponsors must have at least 12 months left in their active duty service commitments.
- Sponsors must complete enrollment election within 30 days of signing in at their new duty stations.

For uninterrupted coverage, service members should enroll their family members in the dental plan at least 30 days before leaving the overseas duty station. This will provide earlier

access to dental care. Coverage is effective the month after service members complete enrollment.

Service members must complete a DD Form 2494 or 2494-1, dated September 1995, to enroll family members. They said earlier versions of the enrollment forms don't contain required enrollment codes.

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HEADLINE: Dental Plan Available in Canada

OCHAMPUS Aurora, CO (NSMN) -- The TRICARE Active-Duty Family Member Dental Plan has expanded its coverage to U.S. military families who live in Canada.

As in the U.S. and other areas covered by the dental plan, military sponsors must enroll family members before they may receive dental services under the plan. Coverage in Canada is the same as for any other location.

Active duty family members who live in Canada may go to any licensed dentist of their choice. Claims submitted for covered services provided by dentists in Canada will normally be paid directly to the patient, who will be responsible for paying the dentist unless the dentist accepts assignment.

Claims will be based on allowed amounts set by the contractor. If the amount paid by the contractor is less than the amount charged by the Canadian dentist, the patient is responsible for paying the difference.

Either the dentist or the patient may submit claims to the contractor. Any standard claim form may be used. However, the following additional information must be included on any form: (1) indication that the patient is covered by the TRICARE Active-Duty Family Member Dental Plan; and (2) the name and Social Security Number of the patient's sponsor.

From now until the end of January 1996 (when a new dental contractor takes over the program), completed claims should be mailed to one of the following addresses, depending on where in Canada the dental care was received: Claims submitted from Alberta, British Columbia, Manitoba, the Northwest Territories, Saskatchewan and the Yukon Territory should be mailed to: Family Member Dental Plan, P.O. Box 269023, Sacramento, CA 95826-9023.

Claims submitted from Labrador, New Brunswick, Newfoundland, Nova Scotia, Ontario, Prince Edward Island and Quebec should be mailed to: Family Member Dental Plan, P.O. Box 9086, Farmington Hills, MI 48333-9086.

Beginning 1 February 1996, a new dental plan contractor, United Concordia Companies Inc. (UCCI), will operate the dental plan. UCCI's mailing address for Canadian claims for services furnished on or after 1 February (and for ongoing orthodontic treatment, or for advance determinations of services to be performed on or after 1 February 1996), will be: United Concordia Companies Inc., FMDF Claims Processing, P.O. Box 8988220, Camp Hill, PA 17089-8220.

Written requests for claim forms, for general information or for inquiries about claims with dates of services on or after 1 February 1996, must be sent to the following address: United Concordia Companies Inc., Customer Service, P.O. Box 898218, Camp

Hill, PA 17089-8218.

All claims will be paid in U.S. dollars. Most claims are processed by the contractor within 21 days of receipt.

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HEADLINE: USNH Yokosuka Undergoes Inspection Survey

USNH Yokosuka, Japan (NSMN) -- At least once every three years, U.S. Naval Hospital Yokosuka is turned upside down and inside out for an intensive inspection -- a survey by the Joint Commission on Accreditation of Healthcare Organizations (JCAHO).

USNH Yokosuka completed its most recent survey in early December and received a most positive verbal outbrief report from the survey team. Although the written report and final score will not be received for several months, in the words of one of the surveyors, "This has been an extremely good survey. You can stand proud and we salute you for it."

All surveyors commented on the teamwork at USNH, a hallmark of a successful TQL program. At the outbrief, a surveyor commented to the commanding officer, "I think you can be proud of this team of people that you've assembled together. ... They care about the patients that are here. I interviewed a patient yesterday, and I was touched. The way that patient interacted with the staff ... "

"I really found the medical staff enthused, knowledgeable, informed and wide open to making really big advancements," said another inspector.

In the previous two JCAHO surveys, USNH Yokosuka had very high scores, one year attaining the highest score for all Navy hospitals. This year's survey also promises to reflect the outstanding quality of care provided by the USNH team.

Story by Bill Doughty, U.S. Naval Hospital Yokosuka

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HEADLINE: Naval Hospital Celebrates Emancipation Proclamation

NAVHOSP Beaufort, SC (NSMN) -- A commemorative reading of the Emancipation Proclamation, in which President Abraham Lincoln proclaimed freedom from enslavement for African Americans during the Civil War, was held at Naval Hospital Beaufort on New Year's Day in the hospital's auditorium.

The former Camp Saxton, located on the Naval Hospital grounds along the Beaufort River, was home to the First South Carolina Volunteers, the first black regiment in the United States Army during the Civil War. It was also here, 133 years ago, that the first-ever reading of the proclamation in the South occurred.

The commemorative reading at the Naval Hospital began with an invocation from Rev. A.C. Redd, a member of the Penn Center Board of Trustees. Penn Center originated from the Penn School, which was the first school established for the education of African Americans, in 1862.

One of the speakers at the ceremony was Dr. Charles Wright, who, with his wife, Roberta, discovered that the location of the first reading was on the Camp Saxton site by reading the diaries of Charlotte Forten. Forten was the first African American

teacher at Penn School and was present at the first reading.

"We are here today to ensure that African American history is not forgotten," said Wright. During the celebration, a commemorative plaque was unveiled that will be placed on the Camp Saxton site to signify its importance in history.

"The reading is a commemoration of something important to African Americans that was lost for many years," said Patricia Smith, Penn Center Board of Trustees member. "Now it will continue to be celebrated."

Story by PFC William M. Lisbon, USMC, Tri-Command Tribune staff

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HEADLINE: Naval Medical Center Remembers Dr. King

NMC San Diego (NSMN) -- Naval Medical Center San Diego held a Martin Luther King Celebration in its Chapel on 12 January. Councilman George Stevens, Fourth District, San Diego, was the guest speaker for the event, which included the solo readings and musical interpretations by guest artists. Among the performers was the Medical Center's own highly acclaimed Gospel Chorus, which sang a medley of inspirational music.

In keeping with the national theme, "Passing the Torch: Igniting the Vision of the New Generation," children from the Child Development Center sang, "We Are the World."

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HEADLINE: HEALTHWATCH - What Parents Need to Know about "Huffing"

CAMP FOSTER Okinawa, Japan (NSMN) -- The criminal investigation division had been tracking the 13- and 14-year-olds for weeks. The teenagers suspected nothing when they walked into the post exchange with their mothers and bought their edge dressing "fix" right under her nose. Yet, when the teens arrived at "Battle Hill" that day after school, edge dressing and plastic bag in hand, the investigator was waiting for them.

After interviewing the teens, David S. Metelski, juvenile criminal investigator, made a discovery he had seen over and over again in teen inhalant abusers: mom and dad had seen the signs, but had no idea that there was a problem until it was too late.

"This (huffing) is the biggest problem right now with juveniles," said Metelski. "All the kids know what's going on, they know what they (the inhalants) are. It's the parents and teachers who don't know."

Inhalant use usually affects teens in seventh, eighth and ninth grades because of the immediate availability of inhalants to that age group, according to Metelski. The inhalant of choice for this age group is edge dressing, followed by air freshener and fuel.

"These are things in the house, things kids can go buy," he said.

Metelski has found that inhalant use isn't socially accepted among teens, so users generally wait until after school and go to heavily forested areas. "These are latch-key kids. The biggest time is when the kids are out of school before mom and dad get home," he said.

According to most teens who get caught, the number one

reason they start abusing inhalants is lack of attention from parents, said Metelski.

"There's usually some change in family structure. One parent goes on a long deployment or goes back to work. The kids start hanging out and learning it (inhalant use)," he said.

"The biggest thing we need to do is educate the parents," said Metelski. "There's no reason for a 13- or 14-year-old to have edge dressing."

There are tell-tale signs that teens are inhaling. According to Metelski, two teens recently spilled edge dressing in their homes, and the parents never questioned it. Here are a few signs that a teen is abusing an inhalant: a bottle of edge dressing; black stains or smudges on clothing, fingernails, and cuticles; odors on breath, clothes or around a teen's room; teens start hanging out in heavily wooded area with one or two friends regularly; continuous cold, red eyes, or symptoms of hay fever; teen says they have been painting -- edge dressing is water soluble; abrupt changes in grades, school attendance, and discipline; and teen abruptly starts coming home late.

Story by LCpl Teresa A. Brown, USMC, reprinted from Marine Corps News Summary (MCNEWS) 01-96

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3. Professional Notes: Information on upcoming symposiums, conferences or courses of interest to Navy Medical Department personnel and wrap-ups on ones attended. Anyone with information to share in this section should contact the editor (see the last paragraph of this message on ways to do so).

Scheduled meetings:

-- 24-26 January 1996, West '96 -- "Technology and Tactics: Meeting the Fuzzy Threat," the 17th Annual Western Conference and Exposition, San Diego, sponsored by the Armed Forces Communications and Electronics Association and the U.S. Naval Institute. For information, call 1 800 336-4583, ext. 6128,, or (703) 631-6128.

-- 31 January to 4 February 1996, 15th Annual National Training Conference, "United into the Future," Association of Naval Services Officers (ANSO), Naval Training Center BOQ (Admiral Kidd Inn), San Diego. For more information, contact your local ANSO Chapter Representative or LCDR Raul Castaneda at DSN 426-4877, (703) 696-4877.

-- 3 February, The 3rd Annual Update in Behavioral/Developmental Pediatrics, in San Francisco, sponsored by the University of California San Francisco Office of Continuing Medical Education. To register, call (415) 476-5808.

-- 5-9 February, Navy Alcohol and Drug Abuse Program (NADAP) Conference, will be held at Naval Air Station Jacksonville, FL, the week of 5 February. For more information, contact Dr. Kennedy or LCDR Turner at ARC Jacksonville, DSN 942-4889, (904) 772-4889; Mr. Mahan at PERS-63, DSN 224-8008, (703) 614-8008; or Mr. Young, BUPERS DET DAPMA, DSN 524-8116, (619) 524-8116.

-- 7-10 February, International Conference on Physician Health, "Uncertain Times: Preventing Illness, Promoting Wellness, Sheraton San Marcos Hotel, Chandler, AZ. To register,

call 1 800 621-8335.

-- 11-14 February, 6th National Managed Care Forum, Hyatt Regency San Diego, (312) 422-3886.

-- 14-16 February, Recent Advances in Neurology, Sheraton Palace Hotel, San Francisco, sponsored by the University of California. For information, call (415) 476-5808.

-- 16-18 February, Second Annual Course on Management of the HIV-Infected Patient: A Practical Approach to the Primary Care Practitioner, in New York City. The course carries 20.25 CME credit hours. For more information, contact Awilda Pinillos, Center for BioMedical Communication, (201) 385-8080.

-- 2 March, 14th Annual Navy Nurse Corps Perioperative Nursing Symposium, Dallas Convention Center. For registration and program information, contact CDR K. Cadwell, NC; (301) 295-1399/5477, DSN 295-1399/5477, email nshlkac@nsh10.med.navy.mil or LCDR Kim Harlow, NC; (301) 295-4180/4181, DSN 295-4180/4181.

-- 22-29 March, Thirty-Seventh Navy Occupational Health and Preventive Medicine Workshop, Virginia Beach, VA. The tri-service Military Audiology Short Course and the Navy Independent Duty Corpsman (IDC) Conference will run concurrently. For more information, call the workshop hotline at (804) 363-5452/5508. The email address is workshop@ehc50.med.navy.mil and <http://ehc40.med.navy.mil/~workshop> on the World Wide Web.

-- 17 April, Third Annual Hospice Foundation of America Teleconference -- "Living with Grief: After Sudden Loss." For more information, call Mr. John Dewey, (202) 638-5419.

-- 19-24 May 1996, Health Promotion Training Course, sponsored by the Navy Environmental Health Center, Norfolk, VA. For more information, contact Ms. Becky Washburn, (804) 363-5598; DSN 864-5598.

-- 23-25 May 1996, 12th Annual Current Issues in Anatomic Pathology, San Francisco, sponsored by the University of California. For information, contact (415) 476-4251.

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HEADLINE: Navy Nurse Corps Perioperative Symposium Scheduled

NSHS Bethesda, MD (NSMN) -- The 14th Annual Navy Nurse Corps Perioperative Nursing Symposium will be held on Saturday, 2 March 1996, at the Dallas Convention Center, just prior to the Congress of the Association of Operating Room Nurses.

This annual meeting provides an opportunity for all Navy perioperative nurses, active duty, reserve, civilian and retired, to attend educational offerings and discuss items of mutual interest. The deadline for registration is 23 February 1996. For registration and program information, contact CDR K. Cadwell, NC, at the Surgical Technology School, Naval School of Health Sciences, Bethesda, MD, (301) 295-1399/5477, DSN 295-1399/5477, FAX (301) 295-0621, or email nshlkac@nsh10.med.navy.mil or LCDR Kim Harlow, NC, Main Operating Room, National Naval Medical Center Bethesda, at (301) 295-4180/4181, DSN 295-4180/4181.

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